



Martin Luther King Jr Basketball Tournament

TEAM REGISTRATION *Please Print or Type*

Team Name _____ Division _____

Coach Name _____ Contact Number () _____

Address _____
Street City State Zip Code

Fax Number () _____ E-mail _____

Assistant Coach _____ Contact Number () _____

Assistant Coach _____ Contact Number () _____

Registration

Fill out the registration form with complete information. **All players 18 years and older must present drivers license, or picture ID at check-in. Youth players must present birth certificates as proof of age.** Registration must be received by Friday, February 17, 2012. Registration forms may be downloaded at www.myspar.org. Fax (318) 673-7800 or mail completed forms to 7401 Jewella Avenue, Shreveport, La. 71108, **Attn TeNeisha McKinney**

If paying by cashier's check, money orders or check (business or personal):

Make payable to: City of Shreveport-SPAR

You must write your driver's license number and expiration date on the check!

General Rules

Tournament information and a complete set of rules will be sent to the coaches the week of the tournament. If the information has not been received by Feb. 17, 2012, please call Mary Murphy (318) 673-7748 or TeNeisha McKinney (318) 673-7749

****PLAYERS ON A HIGH SCHOOL ROSTER ARE PROHIBITED FROM TOURNAMENT PLAY****

Parent/legal guardian if under 18 years old: _____ (initial) I give the City of Shreveport permission to photograph my child/myself for the purpose of publicizing events and/or programs.

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Team Roster Form

Team Name:		Division:	
		Team Gender:	
	Name	Age	Birth Date
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

THERE IS A MAX OF 12 PLAYERS PER ROSTER